

COMMENTS ON THE SECTION 1115 WAIVER APPLICATION

The Mental Health Summit (a list of our members is attached) enthusiastically supports the goal of the draft Section 1115 waiver application to create a Medicaid program that is efficient, effective, flexible and clearly focused on patient outcomes and respect for patient choice and autonomy. We submit these comments with the intent of insuring that the details of the application will fully implement those goals.

- § The Summit enthusiastically supports the use of this waiver to expand Assertive Community Treatment (ACT) teams and Community Support Teams (CST). The waiver should include a clearer commitment to increased use of and an appropriate rate structure for ACT and CST.
- § The Summit enthusiastically supports the use of this waiver to expand Supportive Housing. As the waiver states, supportive housing is a necessary component of any effort to care for persons with behavioral health conditions. For the same reason, the Summit urges the state to expressly request funding for rental subsidies for persons with behavioral health conditions.
- § The Summit enthusiastically supports the use of this waiver to fund credentialed recocery support services (often called “peer support”) for persons with mental illnesses. Such services should not be limited only to “those who did not benefit from the newly progressive and preemptive approach,” but rather must be broadly available to Medicaid recipients. (Draft, p. 40)
- § The waiver **should not** include a request to obtain Federal financial support for Specialized Mental Health Rehabilitation Facilities (SMHRF) by treating SMHRF services as “costs not otherwise matchable” during the waiver period. (Draft, pp 39-40). Illinois has relied on nursing homes to house people with mental illnesses more than any other state. Fortunately decision to enter into the *Williams v. Quinn* and *Colbert v. Quinn* consent decrees committed the state to a system of more humane, efficient and non-institutional care as required by the Americans with Disabilities Act. There is no reason to abandon or delay the implementation of these consent decrees by seeking federal funding for these institutions. Waivers should not be used to **increase** the institutionalization of persons with mental illnesses.
- § The Summit is concerned that there is insufficient detail in the description of Pathway Four (Draft, pp 30-42). Specifically, there is insufficient explanation about how this pathway will be implemented including insufficient discussion of how it will be funded.

Summit members look forward to working with Department of Healthcare and Family Services and the other state agencies who are charged with developing this waiver application.

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